



HIV Disease Monitoring, Prevention, and Care: Medications Distribution

The Louisiana AIDS Drug Assistance Program (ADAP) is supported through federal resources that are awarded annually to every US state, territory and protectorate, as well as additional pharmaceutical rebates secured by the program. The Ryan White HIV/AIDS Treatment and Modernization Act of 2006 (Public Law 109-415, as authorized and amended under Part B of Title XXVI of the Public Health Service (PHS) Act) provides federal resources for the Louisiana ADAP formulary that includes 63 FDA-approved HIV-related medications (antiretroviral medications, as well as pharmaceuticals for the prevention and treatment of Opportunistic Infections) and four diagnostic laboratory services. The result of reducing staff or funding for this program would be an increase in the number of persons who experience HIV-related morbidity, disability or mortality. This is especially true for HIV-infected pregnant women and HIV-exposed infants. Furthermore, the cost of providing expensive specialty medical care, in-patient stays and other interventions could further strain the State's primary medical care infrastructure and resources dedicated to Louisiana Medicaid. If funding was increased, services available through Louisiana ADAP could be expanded to include additional clients, an expanded formulary of HIV-related medications and laboratory testing, as well as the provision of adherence counseling and medication monitoring.

Objective

A minimum of 75% of persons newly-enrolled in Louisiana ADAP will have had at least one viral load (VL) laboratory test result <400 copies (i.e., "undetectable" level of virus) within 12 months after enrollment. (US Health Resources and Services Administration (HRSA) national standard).

Performance Indicators

Percent of persons newly enrolled in Louisiana ADAP who have at least one "undetectable" VL (i.e., <400 copies) within 12 months of enrollment.

Narrative

The Louisiana OPH-HAP receives funding from the Health Resources and Services Administration (HRSA) under the Ryan White HIV/AIDS Treatment Modernization Act of 2006. Louisiana ADAP is the largest component of this annual award and supports a formulary that currently includes 63 FDA-approved HIV-related medications and 4 diagnostic laboratory tests recommended by the US Public Health Service for the treatment of HIV disease. It includes antiretroviral medications and pharmaceuticals for the prevention and treatment of Opportunistic Infections—all of which are purchased at 340B prices. Enrollment in Louisiana ADAP is open to persons who have a documented HIV diagnosis, are residents of Louisiana, are low income (300% FPL or below) and who have no third party payer source. Through access to these medications and laboratory services, persons living with HIV can continue to work and contribute to the State tax base, can avoid vertical transmission from mother to child, can delay disease progression from HIV to AIDS, and can avoid expensive in-patient stays and specialty medical care due to HIV-related morbidity or disability. HIV-infected persons with undetectable viral loads are also less likely to transmit HIV to another person. A limited amount State General Funds are utilized to assist in meeting the 2:1 State “match” requirement for this program. Additionally, OPH-HAP works with the LSU Health Care Services Division to track medical center expenditures on HIV-related care and record those as part of the required State match.

Administration of the award includes:

1. Preparing the annual application to HRSA, as well as a semi annual and final progress report;
2. Meeting all required federal Conditions of Grant Award, including the provision of services to Women, Infants, Children and Youth (WICY);
3. Preparing annual contracts with the ten Medical Centers for the purchase and provision of all medications and diagnostic laboratory tests covered by the formulary;
4. Reconciling monthly invoices and approving payments;
5. Collect client level data on prescriptions dispensed, diagnostic laboratory tests performed, clients served and participant demographics in order to meet federal reporting requirements;
6. Collaborating with LSU HCSD and LSU Shreveport to ensure expenditures sufficient to achieve the required State match.

The AIDS Drug Assistance Program is open to all Louisiana residents living with HIV who are low income (300% FPL or below) and do not have a third party payer source. ADAP provides medications and diagnostic laboratory services to eligible men, women, pregnant women, infants, youth and children who reside in all 64 parishes of the state. Assisting persons living with HIV in maintaining their health allows them to continue to work, achieve educational goals, parent their children, participate fully in their community and continue to contribute to the tax base. This program also contributes to the reduction in medical costs related to ER visits and hospitalizations.

In order to maximize the resources available to all citizens of the State, OPH-HAP collaborates closely with other agencies that provide medication assistance to low income persons living with HIV, such as private insurers, Louisiana Medicaid, the Veterans' Administration, pharmaceutical manufacturers and Medicare Part D. All clients are screened vigorously for eligibility and referred to other resources if ineligible for ADAP. Case Managers supported by OPH-HAP are trained on the various benefits available to potential clients, and which one(s) would be the most appropriate for each client. OPH-HAP also collaborates with other State agencies (such as OMH, OAD and Louisiana Medicaid), and programs within OPH (such as MCH, Family Planning, STD, TB and Immunization) to assure access to complimentary services for low income persons living with HIV disease.

Without the treatment resources available through ADAP, inevitably more persons living with HIV in Louisiana would progress to an AIDS diagnosis and disability, and an increase in HIV-related morbidity and disability would place a greater strain on the medical care infrastructure and on the resources allocated to Louisiana Medicaid. Transmission from mother to child during pregnancy would also increase, and the need for specialized neonatal care.

CFDA Number 93.917 Ryan White HIV/AIDS Treatment Modernization Act of 2006 (Public Law 109-415, as authorized and amended under Part B of Title XXVI of the Public Health Service (PHS) Act)

- In FY 2009, OPH-HAP successfully applied for federal funding in the amount of \$18 million dollars to provide HIV-related medications to low income persons living with HIV disease.
- In FY 2008, OPH-HAP provided 43,780 prescriptions to eligible program participants through the Louisiana ADAP.

- Successful application in FY 2009 for ADAP Supplemental funds resulted in the award of an additional \$3,615,855 dollars. These resources were utilized to increase the eligible federal poverty limit (FPL) of Louisiana ADAP from 200% to 300%.
- As a result of the availability of combination therapy through programs like the Louisiana ADAP, life expectancy for persons living with HIV disease has increased from 10.5 years in 1996 to 22.5 years in 2005.
- Completed a comprehensive Statewide Needs Assessment in the fall of 2008, successfully surveying 1,833 persons living with HIV/AIDS to determine their identified priority needs and assist in allocating federal funds to meet those needs.